

## **Waiver Form**

In consideration of my participation in Redmond's Division of Natural Resources, I do hereby, for myself, my heirs, executors, and administrators, waive, release, and forever discharge any and all rights and claims against the owners and/or developers of the private property which we may need to occupy or cross to access a stream, wetland, or project site; and the City of Redmond, their officers, volunteer team leaders, event sponsors and/or assigns for any and all loss or damages which may be sustained and suffered by me in my traveling to, participation in, and returning from the volunteer projects.

In case of emergency, accident or illness I give my permission to be treated by a professional medical person and be admitted to a hospital if necessary. I agree to be the party responsible for all medical expenses which are incurred in my behalf. Further, I give my permission to have photos or videos taken, without recompense, during said volunteer activity to be used for publicity purposes.

I have read the above statement, and I understand it and my signature is confirmation of my full acceptance of its items.

Participant Signature	Date	
Guardian Signature (if under participant is under 18)	Date	
Yes! Please contact me for future restoration event	s!	
Please print your name		
Address, WA,		
City Zip		
Phone: ( )		
Email:		
03/06; PH		